



01/06/05

AT&T  
Jew

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Ashkenazi, et al. Docket No.: 39780-2730P1C44  
Serial No.: 09/997,428 Group Art Unit: 1646  
Filing Date: November 15, 2001 Examiner: Hamud, Fozia M.  
For: **SECRETED AND TRANSMEMBRANE POLYPEPTIDES AND NUCLEIC ACIDS ENCODING THE SAME**

Express Mail Label No.: EL 977 610 983 US

Mailing Date: January 4, 2005

**NOTICE OF APPEAL**

**Mail Stop AF**  
Commissioner for Patent  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Dear Sir:

Applicant hereby appeals to the Board of Appeals from the decision dated November 15, 2004 of the Primary Examiner finally rejecting Claims 119-127 and 129-131. The item(s) marked below are appropriate:

**Filing Fee:**

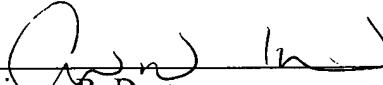
- \$250.00 (small entity)  
 \$500.00 (large entity)

**Time Extension Fee (if applicable):**

- one months (\$ small/large entity)  
 two months (\$ small/large entity)  
 three months (\$ small/large entity)

The Commissioner is authorized to charge filing fee, additional fees or credit overpayment to Deposit Account No. 08-1641 (39780-2730P1C44).

Date: January 4, 2005

By:   
Ginger R. Dreger  
Reg. No. 33,055

**HELLER EHRMAN WHITE & McAULIFFE LLP**

Customer No. 35489  
275 Middlefield Road  
Menlo Park, California 94025  
Telephone: (650) 324-7000

01/07/2005 MAHMED1 0000015 081641 09997428  
01 FC:1401 500.00 DA

Please type a plus sign (+) inside this box

PTO/SB/21 (6-99)

Approved for use through 09/30/2000. OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

JAN 04 2005

**TRANSMITTAL  
FORM**

(to be used for all correspondence after initial filing)

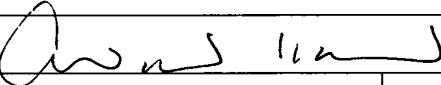
Total Number of Pages in This Submission

Application Number	09/997,428
Filing Date	November 15, 2001
First Named Inventor	Ashkenazi, et al.
Group/Art Unit	1647
Examiner Name	Hamud, Fozia M.
Total Number of Pages in This Submission	Attorney Docket Number 39780-2730P1C44

**ENCLOSURES (check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i>	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input checked="" type="checkbox"/> <b>Appeal Communication to Group</b> <i>(Appeal Notice, Brief, Reply Brief)</i>
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Version with Markings Showing Changes	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> <b>Additional Enclosure(s)</b> <i>(please identify below):</i>
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> stamped return postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		
<b>AUTHORIZATION TO CHARGE DEPOSIT ACCOUNT 08-1641 FOR ANY FEES DUE IN CONNECTION WITH THIS PAPER (Reference Atty. Docket No. 39780-2730P1C44).</b>		

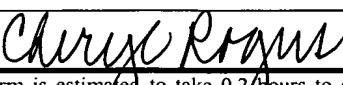
**SIGNATURE OF APPLICANT, ATTORNEY OR AGENT**

Firm or Individual name	GINGER R. DREGER, ESQ., REG. NO. 33,055, HELLER EHRLMAN WHITE & McAULIFFE LLP		
Signature			
Date	JANUARY 4, 2005	Customer Number:	35489

**CERTIFICATE OF EXPRESS MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated below and addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Express Mail Label EL 977 610 983 US

Typed or printed name	CHERYL ANN ROGERS		
Signature		Date	JANUARY 4, 2005

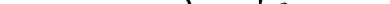
Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop       , Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<p style="text-align: center;"><b>FEE TRANSMITTAL</b></p> <p><b>JAN 04 2005</b></p> <p><b>for FY 2005</b></p> <p><i>Effective 12/08/2004. Patent fees are subject to annual revision.</i></p>		<p style="text-align: center;"><i>Complete if Known</i></p>	
<input checked="" type="checkbox"/> <b>Applicant claims small entity status. See 37 CFR 1.27</b>		Application Number 09/997,428	Filing Date November 15, 2001
		First Named Inventor Ashkenazi, et al.	Examiner Name Hamud, Fozia M.
		Art Unit 1647	Attorney Docket No. 39780-2730P1C44
<b>TOTAL AMOUNT OF PAYMENT</b> (\$ 500.00)			

METHOD OF PAYMENT (check one)					FEE CALCULATION (continued)				
<input type="checkbox"/> Check	<input type="checkbox"/> Credit card	<input type="checkbox"/> Money Order	<input type="checkbox"/> Other	<input type="checkbox"/> None	3. ADDITIONAL FEES				
<input checked="" type="checkbox"/> Deposit Account:					Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description
Deposit Account Number	08-1641 (Docket No. 39780-2730P1C44)				1051	130	2051	65	Surcharge - late filing fee or oath
Deposit Account Name	Heller Ehrman White & McAuliffe LLP				1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet
The Commissioner is authorized to: (check all that apply)					1053	130	1053	130	Non-English specification
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments					1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination
<input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application					1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.					1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action
FEE CALCULATION					1251	120	2251	60	Extension for reply within first month
1. BASIC FILING FEE					1252	450	2252	225	Extension for reply within second month
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	1253	1,020	2253	510	Extension for reply within third month
1001	300	2001	150	Utility filing fee	1254	1,590	2254	795	Extension for reply within fourth month
1002	350	2002	175	Design filing fee	1255	2,160	2255	1,080	Extension for reply within fifth month
1003	550	2003	275	Plant filing fee	1401	500	2401	250	Notice of Appeal
1004	790	2004	395	Reissue filing fee	1402	500	2402	250	Filing a brief in support of an appeal
1005	200	2005	100	Provisional filing fee	1403	1,000	2403	500	Request for oral hearing
SUBTOTAL (1) _____ (\$)					1451	1,510	1451	1,510	Petition to institute a public use proceeding
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE					1452	500	2452	250	Petition to revive - unavoidable
Total Claims	_____	-20** =	_____ x _____	= _____	1453	1,500	2453	750	Petition to revive - unintentional
Independent Claims	_____	-3** =	_____ x _____	= 0	1501	1,400	2501	700	Utility issue fee (or reissue)
Multiple Dependent	_____		_____	= 0	1502	800	2502	400	Design issue fee
Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	1503	1,100	2503	550	Plant issue fee
1202	50	2202	25	Claims in excess of 20	1460	1,460			Petitions to the Commissioner
1201	200	2201	100	Independent claims in excess of 3	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)
1203	360	2203	180	Multiple dependent claim, if not paid	1806	180	1806	180	Submission of Information Disclosure Stmt
1204	200	2204	100	**Reissue independent claims over original patent	8021	40	8021	40	Recording each patent assignment per property (times number of properties)
1205	50	2205	25	**Reissue claims in excess of 20 and over original patent	1809	790	2809	395	Filing a submission after final rejection (37 CFR 1.129(a))
SUBTOTAL (2) _____ (\$)					1810	790	2810	395	For each additional invention to be examined (37 CFR 1.129(b))
					1801	790	2801	395	Request for Continued Examination (RCE)
					1802	900	1802	900	Request for expedited examination of a design application
Other fee (specify) _____					SUBTOTAL (3) _____ (\$500.00)				

*\*\*or number previously paid, if greater; For Reissues, see above*

SUBMITTED BY		Complete (if applicable)		
Name (Print/Type)	GINGER R. DREGER, ESQ.	Registration No. (Attorney/Agent)	33,055	Telephone
Signature		Date	JANUARY 4, 2005	Customer No. 35489

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop \_\_\_\_\_, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.